## FORM D

**OMB APPROVAL** 

SEC USE ONLY

3235-0076

## **UNITED STATES** SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

Wall Processing

SEP 102008

business trust

Actual or Estimated Date of Incorporation or Organization:

Jurisdiction of Incorporation: (Enter two-letter U.S. Postal Service Abbreviation for State:

# FORM D

☐ limited partnership, to be formed

14452	92
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Expires: August 31, 2008 Estimated Average burden

hours per form . . . . . 16.00

OMB Number:

SEP TUZOOO	DUDGI	OF SALE OF SE ANT TO REGUL			Prefix	Serial
Washington, DC	SE UNIFORM LIN	CTION 4(6), ANI AITED OFFERI		ON	DATE RE	ECEIVED
Name of Offering: LARCH LANE ABS		N OFFSHORE	LTD.: offering	g of Shares	·	<del></del>
Filing Under (Check box(es) that apply):	☐ Rule 504	☐ Rule 505	<b>№</b> Rule 506	☐ Section 4(	6) ULO	
Type of Filing:	New Filing	☐ Amendment				
	A. B	ASIC IDENTIFICA	ATION DATA			
1. Enter the information requested about the	issuer					
Name of Issuer ( check if this is an a	mendment and name ha	s changed, and indic	ate change.)			
LARCH LANE ABSOLUTE RET	URN OFFSHORE	LTD.			J IP I 199 MAIN LAPASS COMMISSION	
Address of Executive Offices	(Number	and Street, City, Sta	te, Zip Code)	Telephone Numb		
c/o Walkers SPV Limited, Walker House, P.C	D., Mary St., Grand Cay	man, KYI-9002 Cay	man Islands	345-943-3300	}	#### [6]6]
Address of Principal Business Operations	(Number	and Street, City, Sta	te, Zip Code)	Telephone Numb	F 1990M BOSEN 190M BOSEN I	1111 <b>- 1114   1110   1114   1114   111</b>
(if different from Executive Offices)					0805	59823
Brief Description of Business: To operate	as a Cayman Island	d Exempted Con	npany			
Type of Business Organization						
Corporation	☐ limited partner	ship, already formed	ı 🗷 o	ther (please specify):	Cayman Island Ex	empted Company

■ Actual

## **GENERAL INSTRUCTIONS**

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6)

Month

Year

0 2

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

CN for Canada; FN for other foreign jurisdiction)

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

## ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

		A. BASIC IDENTIFIC	CATION DATA					
2. Enter the information	requested for the follo							
Each promoter of the	issuer, if the issuer has	s been organized within the past	five years;					
Each beneficial owner	• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;							
• Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and								
<ul> <li>Euch general and ma</li> </ul>	naging partner of partner	ership issuers.						
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☑Investment Manager or "IM"	☐ Director	0	General and/or Managing Partner		
Full Name (Last name first, if in LARCH LANE ADVISO)	•	e "Investment Manager" (	or "IM")					
Business or Residence Address	,	<b>_</b>	<u> </u>					
800 Westchester Avenue, S-618	, Rye Brook, New Yorl	k 10573						
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	Executive Officer of IM	☑ Director of IM		General and/or Managing Partner		
Full Name (Last name first, if in	dividual)							
JURISH, MARK A.								
Business or Residence Address	(Number and Street, 0	City, State, Zip Code)						
800 Westchester Avenue, S-618	, Rye Brook, New Yorl	k 10573						
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	Executive Officer of IM	☐ Director		General and/or Managing Partner		
Full Name (Last name first, if in	dividual)							
STEMME, KENNETH W.								
Business or Residence Address	(Number and Street, 6	City, State, Zip Code)						
800 Westchester Avenue, S-618	, Rye Brook, New Yorl	k 10573						
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	Executive Officer of IM	☐ Director		General and/or Managing Partner		
Full Name (Last name first, if in	dividual)							
MIRABILE, KEVIN								
Business or Residence Address	(Number and Street, 0	City, State, Zip Code)		•				
800 Westchester Avenue, S-618	, Rye Brook, New Yorl	k 10573						
Check Box(es) that Apply:	□ Promoter	☐ Beneficial Owner	Executive Officer of IM	☐ Director		General and/or Managing Partner		
Full Name (Last name first, if in	idividual)							
WEISSMAN, ROSS								
Business or Residence Address	(Number and Street, C	City, State, Zip Code)						
800 Westchester Avenue, S-618	, Rye Brook, New Yorl	k 10573						
Check Box(es) that Apply:	□ Promoter	☐ Beneficial Owner	Executive Officer of IM	☐ Director		General and/or Managing Partner		
WILLIAMS, M. TODD								
Business or Residence Address	(Number and Street, 0	City, State, Zip Code)						
800 Westchester Avenue, S-618	, Rye Brook, New Yorl	k 10573						
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer of IM	☑ Director of IM		General and/or Managing Partner		
Full Name (Last name first, if in	ıdividual)							
TURPIN, THOMAS M.								
Business or Residence Address	(Number and Street,	City, State, Zip Code)						
800 Westchester Avenue, S-618								
	_	k sheet, or copy and use addition			_			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	Executive Officer	Director of IM		General and/or Managing Partner		

Full Name (Last name first, if in	ndividual)		•				
GIBSON, LINDA TILTON							
Business or Residence Address (Number and Street, City, State, Zip Code)							
800 Westchester Avenue, S-618	, Rye Brook, New Y	ork 10573					
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	Director of IM		General and/or	
			of IM	•		Managing Partner	
Full Name (Last name first, if ir	idividual)						
CLARKE, STEPHEN							
Business or Residence Address	(Number and Stree	t, City, State, Zip Code)	•				
800 Westchester Avenue, S-618, Rye Brook, New York 10573							
	(Use bla	ank sheet, or copy and use addit	tional copies of this sheet, as ne	cessary.)		-	

					<u>B.</u> I	NFORM.	ATION A	BOUT O	FFERINC	<u>;                                    </u>				
													Yes	No
1. Has t	the issuer	sold, or do	es the issue	r intend to	sell, to non	-accredited	investors i	n this offeri	ing?				🗆	X
									ling under 1					
2. What	t is th <b>e</b> mi	nimum inv	estment the	at will be a	ccepted from	m any indiv	ridual?		•••••	•••••••			\$250,00	00 *
													Yes	No
		<del>-</del>		=	· <del>-</del>		=		e minimum	=				
3. Does	. Does the offering permit joint ownership of a single unit?							🗵						
solici regis	itation of tered with	purchasers the SEC	s in connect and/or with	tion with s a state or s	ales of sec tates, list th	urities in t	he offering the broker	. If a person or dealer. I	on to be lis	ted is an a	ssociated p	erson or ag	similar remunent of a broke ssociated perse	r or dealer
Full Name	(Last nar	ne first, if	individual)											
NONE														
Business o	r Residen	ce Address	(Number	and Street,	City, State,	Zip Code)	, , , , , , , , , , , , , , , , , , ,							
Name of A	Associated	Broker or	Dealer							· · · · ·	·····			
States in W	Vhich Pers	son Listed	Has Solicit	ed or Intend	ds to Solici	t Purchaser	s							
														tates
	[AL] [IL]	[AK] [IN]	[AZ] [IA]	[AR] [KS]	[CA] [KY]	[CO] [LA]	[CT] [ME]	[DE] [MD]	[DC] [MA]	[FL] [MI]	[GA] [MN]	[HI] [MS]	[ID] [MO]	
	[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	
	[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[wv]	[WI]	[WY]	[PR]	
Full Name	(Last nan	ne first, if	individual)					-						
Business o	r Residen	ce Address	(Numbe	r and Street	t, City, Stat	e, Zip Code	<del>:</del> )							
Name of A	Associated	Broker or	Dealer							· · · · · · · · · · · · · · · · · · ·				
States in U	Vhich Pers	on Listed	Has Solicit	ed or Inten	de to Solici	t Purchaser:	•							
	•						='							
-				· · · · · · · · · · · · · · · · · · ·									🗖 All Si	tates
	[AL] [IL]	[AK] [IN]	[AZ] [IA]	[AR] [KS]	[CA] [KY]	[CO] [LA]	[CT] [ME]	[DE] [MD]	[DC] [MA]	[FL] [MI]	[GA] [MN]	[HI] [MS]	[ID] [MO]	
	[MT]	[NE]	[NV]	[NH]	[או]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	
	[RI]	[sc]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[wv]	[wɪ]	[wyj	[PR]	
Full Name	(Last nar	ne first, if	individual)											
Business o	r Residen	ce Address	s (Numbe	r and Stree	t, City, Stat	e, Zip Code	:)							
Name of A	Associated	Broker or	Dealer		<u> </u>									
States in V	Vhich Pers	son Listed	Has Solicit	ed or Intend	ds to Solici	t Purchaser	<u> </u>			· · · · · · · · · · · · · · · · · · ·				
(Che	ck "All St	tates" or ch	eck individ	lual States)						• • • • • • • • • • • • • • • • • • • •		••••	🗖 All Si	tates
	[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
		[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	
	[MT] [RI]	[NE] [SC]	[NV] ISDI	[NH] (TN)	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]	
	14341	1301	וענו	1 1 1 1 1	114	1011	1 7 1 1	1 7 73 1	1 YY AL	1 44 A I	1 44 11	1 77 1	II IN I	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

## C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	"O" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price (1)	Amount Already Sold (2)
	Debt	<b>S</b>	\$
	Equity	\$ <u>75,000,000</u>	\$ <u>8.874.848.19</u>
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)	<b>\$</b>	\$
	Partnership Interests	<b>S</b>	S
	Other (specify)	\$	\$
	Total	\$ <u>75,000,000</u>	\$ <u>8.874.848.19</u>
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	32	\$ <u>8,874,848,19</u>
	Non-accredited Investors	N/A	\$ <u>N/A</u>
	Total (for filings under Rule 504 only)	N/A	\$ <u>N/A</u>
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filling is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
	Type of offering	Type of Security	Dollar Amount Sold
	Rule 505	N/A	\$N/A
	Regulation A	 N/A	\$ N/A
	Rule 504		\$N/A
	Total	 N/A	\$ N/A
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees	<b>X</b>	\$0-
	Printing and Engraving Costs.	🗵	\$ <u>-0-</u>
	Legal Fees	🗵	\$75,000
	Accounting Fees	🗵	\$ 5,000
	Engineering Fees	🗵	\$0-
	Sales Commissions (specify finders' fees separately)	X	\$0-
	Other Expenses (identify)	X	\$ <u>5,000</u>
	Total	<b>X</b>	\$ 85,000 (3)
(1)	The Issuer is offering an indefinite amount of limited partnership interests. The total aggregate amount is provided	for the purpose of filin	g this Form D.

<sup>(2)</sup> The number of investors and the amount already sold reflect sales to U.S. and non-U.S. persons by the Issuer in Larch Lane Absolute Return Offshore Ltd. All U.S. investors must meet the criteria for "accredited investors."

<sup>(3)</sup> The amount reflects an estimate of initial costs only.

total expenses furnished in response to Part C -	te offering price given in response to Part C - Question 1 and Question 4.a. This difference is the "adjusted gross proceeds to	\$ <u>74,915</u>	5,000
the purposes shown. If the amount for any purp	s proceeds to the issuer used or proposed to be used for each of pose is not known, furnish an estimate and check the box to the listed must equal the adjusted gross proceeds to the issuer set		
		Payments to Officers, Directors, and Affiliates	Payments to Others
Salaries and fees		<b>X</b> \$ (4)	□ \$
Purchases of real estate		<b>S</b>	<b>□</b> \$
Purchase, rental or leasing and installation of m	achinery and equipment	<b></b>	□ <b>\$</b>
Construction or leasing of plant buildings and fa	acilities	<b></b>	□ \$
Acquisition of other businesses (including the v may be used in exchange for the assets or securi	alue of securities involved in this offering that ities of another issuer pursuant to a merger)	□ \$	<b>-</b> \$
Repayment of indebtedness		<b></b>	□ \$
Working capital		□ \$	□ \$
Other (specify): Investments		□ \$	<b>X</b> \$74,915,000
Column Totals		<b>⊠</b> \$ <u>(4)</u>	<b>⊠</b> \$ <u>74,915,000</u>
Total Payments Listed (column totals added)		<b>X</b> _74	4,915,000
	the Issuer, serves as the Issuer's Investment Manager fering materials set forth detailed discussions of the man.  D. FEDERAL SIGNATURE		d to receive an and
	the undersigned duly authorized person. If this notice is filed un curities and Exchange Commission, upon written request of its sta of Rule 502.		
SSUET (Print or Type)  ARCH LANE ABSOLUTE RETURN  OFFSHORE LTD.	Signature  M. TaldWill	Date September 5,	2008
lame of Signer (Print or Type)	Title of Signer (Print or Type)		
By: M. Todo Williams	M. TODD WILLIAMS, CHIEF LEGAL OFFICER	E	VD

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)